Case 19-14122-elf Doc 19 Filed 08/05/19 Entered 08/06/19 09:51:18 Desc Main Document Page 1 of 32

Fill in this in	nformation to i	dentify your case	and this filing:		
Debtor 1	Michael	D.	Hawk		
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United States F	Sankruptev Court for	the: FASTERN DIS	T. OF PENNSYLVANIA		
		the. <u>LACTERIT DIC</u>	1. OF TENNOTEVANIA		
Case number (if known)	19-14122			_	if this is an led filing
Official Form	m 106A/B				
Schedule A	A/B: Property	/			12/15
the asset in the filing together, k sheet to this for Part 1: D 1. Do you own	category where you both are equally re rm. On the top of a Describe Each R n or have any lega	ou think it fits best. B sponsible for supplyiny additional pages, esidence, Buildir	ist an asset only once. If an a le as complete and accurate a ng correct information. If mo write your name and case nur ng, Land, or Other Real I	s possible. If two married per re space is needed, attach a mber (if known). Answer eve Estate You Own or Have	eople are separate ry question.
	o to Part 2. Vhere is the propert	y?			
1.1. Residence Debtor believe \$255,000	es home to be wo	Check all orth ☑ Single ☐ Duple	ne property? that apply. e-family home x or multi-unit building ominium or cooperative	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim Current value of the entire property?	ims on Schedule D:
Berks		-	factured or mobile home	\$255,000.00	\$255,000.00
County		Land Invest Times Other		Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
		Who has	an interest in the property?	Fee Simple	
		Debto	e. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and anoth	Check if this is comm (see instructions)	nunity property
			ormation you wish to add abo	ut this item, such as local	_
	•	•	of your entries from Part 1, in ite that number here	_	\$255,000.00
Part 2: D	escribe Your V	ehicles			
-	_	•	n any vehicles, whether they a also report it on Schedule G: Ex	_	-
3. Cars, vans,	, trucks, tractors, s	port utility vehicles,	motorcycles		
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 Michael	D. Hawk	Cas	se number (if known) 19-1	14122
Othe	e: r: roximate mileage: er information: 1 Dodge Durane	Dodge Durango 2011 86,000 go (approx. 86,000	Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the entire property? \$13,000.00	
3.2. Mak Mod Yea App Othe	e: lel: r: roximate mileage: er information: 4 Dodge Ram 1: es) Watercraft, aircra	500 (approx. 96,000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) and other recreational vehicles, other vehicles at watercraft, fishing vessels, snowmobiles, mand other recreations.	amount of any secured cla Creditors Who Have Clain Current value of the entire property? \$17,000.00 icles, and accessories	
5.		• •	own for all of your entries from Part 2, inclu Part 2. Write that number here		\$30,000.00
			and Household Items terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examples: Major	_	ens, china, kitchenware oom, dining room, 4 bedrooms, 2.5 bar orated by reference	throoms, garage all	\$7,000.00
7. 8.	music	e 4 TVs, 1 comput	video, stereo, and digital equipment; compute evices including cell phones, cameras, media ter, 2 ipads, 3 smartphones, xbox, wii-	players, games	\$700.00
	Examples: Antiquestamp	ues and figurines; paintin o, coin, or baseball card c e Baseball cards,	gs, prints, or other artwork; books, pictures, o collections; other collections, memorabilia, col football cards - older cards that have ue or of content of collection	lectibles	Unknown
9.	Examples: Sports canoe	es and kayaks; carpentry	, and other hobby equipment; bicycles, pool to tools; musical instruments	•	
	Yes. Describ	e Treadmill, weigl	nt bench, baseball and football equipm	ent for kids	\$1,000.00

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Deb	tor 1	Michael D. Hawk	Case number (if known) 19-1	4122		
10.	Firearm Example		mmunition, and related equipment			
	☐ No ✓ Yes.	Describe hunting rifle	•	\$400.00		
11.	Clothes Example	es: Everyday clothes, furs, le	ather coats, designer wear, shoes, accessories			
	☐ No ✓ Yes.	Describe Clothing		\$1,500.00		
12.	Jewelry Example	es: Everyday jewelry, costum gold, silver	e jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,			
	□ No ✓ Yes.	Describe Wedding rin	ngs	\$500.00		
13.	Example	m animals es: Dogs, cats, birds, horses				
	☐ No ✓ Yes.	Describe Dog		\$0.00		
14.	 Any other personal and household items you did not already list, including any health aids you did not list 					
	سنا	Give specific mation		\$50.00		
15.			ntries from Part 3, including any entries for pages you have er here	\$11,150.00		
Pa	art 4:	Describe Your Finance	cial Assets			
			ole interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.		
16.	Cash Example	es: Money you have in your w petition	vallet, in your home, in a safe deposit box, and on hand when you file your			
	☐ No ✓ Yes.		Cash:	\$100.00		
17.	•	•	er financial accounts; certificates of deposit; shares in credit unions, her similar institutions. If you have multiple accounts with the same			
	□ No ☑ Yes.		Institution name:			
	17.	Checking account:	Wells Fargo Checking account	\$1,000.00		
	17.	2. Checking account:	BBT Checking account;	\$4,000.00		
18.		mutual funds, or publicly traces: Bond funds, investment a	aded stocks ccounts with brokerage firms, money market accounts			
	<u> </u>	Institution	n or issuer name:			

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Debt	otor 1 Michael D. Hawk	Case number (if known) 19-14122
19.	Non-publicly traded stock and interests in incorporated and uninc an interest in an LLC, partnership, and joint venture	corporated businesses, including
	No Yes. Give specific information about them Name of entity:	% of ownership:
20.	Government and corporate bonds and other negotiable and non-non-negotiable instruments include personal checks, cashiers' checks, pro Non-negotiable instruments are those you cannot transfer to someone	omissory notes, and money orders.
	No Yes. Give specific information about them Issuer name:	
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savin profit-sharing plans	gs accounts, or other pension or
	No ☐ Yes. List each account separately. Type of account: Institution name:	
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may cor Examples: Agreements with landlords, prepaid rent, public utilities (elecompanies, or others	· · ·
	✓ No ☐ Yes Institution name or indi	vidual:
23.	Annuities (A contract for a specific periodic payment of money to you	
	✓ No ☐ Yes Issuer name and description:	
24.	Interests in an education IRA, in an account in a qualified ABLE pt 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	rogram, or under a qualified state tuition program.
	No ☐ Yes Institution name and description. Separate	taly file the records of any interests 11 LLS C & 521(c)
25.	Trusts, equitable or future interests in property (other than anythin powers exercisable for your benefit	
	✓ No ☐ Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellect Examples: Internet domain names, websites, proceeds from royalties	• • •
	NoYes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative associations.	on holdings, liquor licenses, professional licenses
	✓ No ☐ Yes. Give specific information about them	

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Deb	otor 1 Mich	nael D. Hawk			Case number (if known)	<u>19-14</u>	122
Mor	ney or property	y owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds of	owed to you					
	☑ No						
	_	e specific information, including whether				Federal:	: <u> </u>
		dy filed the returns	ei			State:	
	and the ta	ax years				Local:	
29.	Family support Examples: Pa		n alimony, spousal supp	port, child support, mainte	nance, divorce settlement,	, property	settlement
		e specific information	on		Alimony:		
	_ _				Maintenand	ce:	
					Support:		
					Divorce se	ttlement:	
					Property se		
- 1		e specific informatio	on				
31.		nsurance policies					
	Examples: He	ealth, disability, or i	ife insurance; health sa	avings account (HSA); cred	dit, homeowner's, or renter	's insurar	ice
	Yes. Nan company	me the insurance of each policy s value	Company name:	В	Beneficiary:	Su	rrender or refund value:
32.	Any interest if	in property that is beneficiary of a livi	due you from someor		·		
	✓ No ☐ Yes. Give	e specific information	on				
33.	_	•	hether or not you have ent disputes, insurance	e filed a lawsuit or made claims, or rights to sue	a demand for payment		
	✓ No ☐ Yes. Des	scribe each claim					
34.	rights to set		ated claims of every na	ature, including counterd	claims of the debtor and		
	✓ No ☐ Yes. Des	scribe each claim					
35.	Any financial	l assets you did no	ot already list				
	✓ No ☐ Yes. Give	e specific information	on				
36.		-		I, including any entries fo		→	\$5,100.00

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Deb	tor 1	Michael D. Hawk	Case number (if known)	19-14122
P	art 5:	Describe Any Business-Related Property You Own o	r Have an Interest In. List	any real estate in Part 1
37.	Do you	u own or have any legal or equitable interest in any business-relat	ted property?	
		o. Go to Part 6. ss. Go to line 38.		
				Current value of the portion you own? Do not deduct secured
88.	Accou	nts receivable or commissions you already earned		claims or exemptions.
	✓ No	s. Describe		
39.		equipment, furnishings, and supplies oles: Business-related computers, software, modems, printers, copiers desks, chairs, electronic devices	s, fax machines, rugs, telephones,	
	✓ No	s. Describe		
10.	Machi	nery, fixtures, equipment, supplies you use in business, and tools	s of your trade	
	✓ No	s. Describe		
11.	Invent	ory		
	☑ No	ss. Describe		
2.	Interes	sts in partnerships or joint ventures		
	☑ No	s. Describe Name of entity:	% of ownersh	ip:
3.	Custor	mer lists, mailing lists, or other compilations		
	✓ No	is. Do your lists include personally identifiable information (as de No Yes. Describe	efined in 11 U.S.C. § 101(41A))?	
4.	Any bu	usiness-related property you did not already list		
	☑ No	s. Give specific information.		
5.		ee dollar value of all of your entries from Part 5, including any entred for Part 5. Write that number here		→ \$0.00
Pa	art 6:	Describe Any Farm- and Commercial Fishing-Related If you own or have an interest in farmland, list it in Part 1.	d Property You Own or Hav	ve an Interest In.
6.	Do you	u own or have any legal or equitable interest in any farm- or comn	nercial fishing-related property?	
		o. Go to Part 7.		

Official Form 106A/B Schedule A/B: Property page 6

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Deb	tor 1	Michael D. Hawk	Case number (if known)	19-1	4122
47	Farm a	nimale			Current value of the portion you own? Do not deduct secured claims or exemptions.
41.		es: Livestock, poultry, farm-raised fish			
48.	Crops	either growing or harvested			
		. Give specific rmation			
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of tra	ide		
	✓ No ☐ Yes	i			
50.	Farm a	nd fishing supplies, chemicals, and feed			
	✓ No ☐ Yes	i			
51.	Any far	m- and commercial fishing-related property you did not already list			
	_	s. Give specific rmation			
52.		e dollar value of all of your entries from Part 6, including any entries for d for Part 6. Write that number here		→	\$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest in Tha	t You Did Not List A	bove	
53.		have other property of any kind you did not already list? es: Season tickets, country club membership			
	✓ No ☐ Yes	. Give specific information.		ı	
54.	Add the	e dollar value of all of your entries from Part 7. Write that number here.		→	\$0.00

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Debto	Michael D. Hawk	Case number (if known)	19-14122	
Par	t 8: List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2		>	\$255,000.00
56. F	Part 2: Total vehicles, line 5	\$30,000.00		
57. F	Part 3: Total personal and household items, line 15	\$11,150.00		
58. F	Part 4: Total financial assets, line 36	\$5,100.00		
59. F	Part 5: Total business-related property, line 45	\$0.00		
60. F	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	Part 7: Total other property not listed, line 54	+ \$0.00		
62. T	otal personal property. Add lines 56 through 61	\$46,250.00 Copy personal property total	_	\$46,250.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$301,250.00

Official Form 106A/B Schedule A/B: Property page 8

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Fill in this information to identify your case:					
Debtor 1	Michael First Name	D. Middle Name	Hawk Last Name		
Debtor 2					
(Spouse, if filing)		Middle Name	Last Name T. OF PENNSYLVANIA		
Case number	19-14122	or the. EASTERN DIS	1. OF PENNSTEVANIA		
(if known)	19-14122				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You C	laim as Exempt		
 Which set of exemptions are you claiming? You are claiming state and federal nonbated You are claiming federal exemptions. 	nkruptcy exemptions. U.S.C. § 522(b)(2)	- ,,,,	
2. For any property you list on Schedule A/B	that you claim as exen	npt, fill in the information	below.
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Residence Debtor believes home to be worth \$255,000 Line from Schedule A/B:	\$255,000.00	\$15,702.21 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
Brief description: 2011 Dodge Durango (approx. 86,000 miles) Line from Schedule A/B: 3.1	\$13,000.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Brief description: 2014 Dodge Ram 1500 (approx. 96,000 miles) Line from Schedule A/B: 3.2	\$17,000.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ✓ No ✓ Yes. Did you acquire the property covered.	Byears after that for cas	es filed on or after the date	,

Debtor 1 Michael D. Hawk			Case number (if known)			
Part 2:	Additional Page					
	iption of the property and line on \/B that lists this property	Current value of the portion you own		ount of the emption you claim	Specific I	aws that allow exemption
		Copy the value from Schedule A/B		eck only one box for th exemption		
bedrooms contents i	otion: (ving room, dining room, 4 s, 2.5 bathrooms, garage all ncorporated by reference chedule A/B:6	\$7,000.00		\$7,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
smartphoi	otion: omputer, 2 ipads, 3 nes, xbox, wii-u chedule A/B: 7	\$700.00		\$700.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
cards that uncertain collection	cards, football cards - older have been handed down; of value or of content of	Unknown		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
football ed	otion: weight bench, baseball and quipment for kids chedule A/B: 9	\$1,000.00		\$1,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
Brief descrip hunting rif Line from So		\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
Brief descrip Clothing Line from So	otion: chedule A/B: 11	\$1,500.00		\$1,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
Brief descrip Wedding r Line from So		\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(4)
Brief descrip Nebulizer Line from So	otion: chedule A/B: 14	\$50.00		\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
Brief descrip Cash Line from So	otion: chedule A/B: 16	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(5)

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Debtor 1 Michael D. Hawk			Case number (if known)			
Part 2:	Additional Page					
	iption of the property and line on //B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B		eck only one box for h exemption		
Brief descrip Wells Farg	otion: go Checking account	\$1,000.00	\Box	\$1,000.00 100% of fair market	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B:17.1				value, up to any applicable statutory limit		
Brief descrip	otion: king account;	\$4,000.00	1	\$4,000.00 100% of fair market	11 U.S.C. § 522(d)(5)	
Line from So	chedule A/B: 17.2		_	value, up to any applicable statutory limit		

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Debtor 1	ormation to ident Michael First Name	D. Middle Name	Hawk Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	EASTERN DIS	ST. OF PENNSYLVA	NIA		
Case number (if known)	- I Check if this is an					
Official Form	106D					
Schedule D:	Creditors Wh	o Have Cla	nims Secured b	y Property		12/15
1. Do any credit No. Che Yes. Fill Part 1: Lis 2. List all securclaim, list the creditor has a	tors have claims secuck this box and submit in all of the information that All Secured Claed claims. If a creditor separately for particular claim, list the ible, list the claims in a	this form to the on below. ims or has more than each claim. If me other creditors	one secured ore than one in Part 2. As	ŕ	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the	e property that	\$15,429.00	\$13,000.00	\$2,429.00
Credit Acceptan Creditor's name 25505 West Twe Number Street			e Durango (approx.			
Southfield City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of to a community	Debtor 2 only the debtors and anoth	Continged Unliquidate Disputed Nature of lie An agree Statutory Judgmer Other (in Purcha	ated an. Check all that apply ement you made (such a tien (such as tax lien, n at lien from a lawsuit cluding a right to offset) se Money	is mortgage or secured nechanic's lien)	car loan)	
Date debt was inc	urred	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$15,429.00

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Debtor 1 Michael D. Hawk		_ Case number (if	known) 19-14122	
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Crescent Bank and Trust Creditor's name Customer Correspondence Number Street P.O. Box 61813 New Orleans LA 70161-1813 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Describe the property that secures the claim: 2014 Dodge Ram 1500 (approx. 96,000 miles) As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset) Auto Loan	s mortgage or secured	\$17,000.00 car loan)	\$5,322.00
Date debt was incurred 2.3 Flagstar Bank Creditor's name 5151 Corporate Drive Number Street	Last 4 digits of account number Describe the property that secures the claim: Residence	\$233,849.00	\$255,000.00	
Troy MI 48098 City State ZIP Code Who owes the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset) Purchase Money	s mortgage or secured	car loan)	
Date debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$256,171.00

Debtor 1	Michael D. Hawk	Case number (if known)				
Part 1:	Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Creditor's name c/o Roland Number St	& Spa Service The control of the con	Describe the property that secures the claim: Residence	\$5,448.79	\$255,000.00		
Reading City Who owes Debtor Debtor Debtor At least	PA 19603 State ZIP Code the debt? Check one. 1 only	As of the date you file, the claim is: ☐ Contingent ☐ Unliquidated ☑ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as ☐ Statutory lien (such as tax lien, media) ☐ Judgment lien from a lawsuit ☑ Other (including a right to offset) ☐ Judgment	mortgage or secured	car loan)		
Date debt w	vas incurred	Last 4 digits of account number				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$5,448.79

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$277,048.79

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Fill in this inf	overstion to in	antifu value a				
FIII IN THIS IN	ormation to id	entity your ca	ase:			
Debtor 1	Michael First Name	D. Middle Name	Hawk Last Name			
	i iistivaine	Middle Name	Lastiname			
Debtor 2 (Spouse, if filing)	Firet Name	Middle Name	Last Name			
(Spouse, ii iiiiig)	i iistivaine	Middle Name	Lastiname			
United States Ba	nkruptcy Court for	the: EASTERN	DIST. OF PENNSYLVANIA			
Case number (if known)	19-14122				Check if this i	
Official Form	106E/F			J		
Schedule E/	/F: Creditors	s Who Have	e Unsecured Claims			12/15
on Schedule A/B: Do not include an If more space is n to this page. On t	Property (Officially creditors with pleeded, copy the the top of any add	I Form 106A/B) a partially secured Part you need, fi litional pages, w	acts or unexpired leases that country on Schedule G: Executory Conclaims that are listed in Schedule II it out, number the entries in the rite your name and case number secured Claims	entracts and Unexpire on D: Creditors Who H boxes on the left. A	ed Leases (Offic Iold Claims Sec	cial Form 106G). cured by Property.
	tors have priority	unsecured clain	ne against vou?			
	to Part 2.	unsecured claim	ns against you!			
✓ No. Got	lo Pail 2.					
claim. For ea show both prid more space is	ch claim listed, ide ority and nonpriorit	entify what type of y amounts. As m y unsecured clain	creditor has more than one priority of claim it is. If a claim has both prior nuch as possible, list the claims in a ns, fill out the Continuation Page of	ity and nonpriority am Iphabetical order acco	ounts, list that clording to the cred	aim here and ditor's name. If
(For an explai	nation of each type	of claim, see the	e instructions for this form in the inst			
				Total claim	Priority	Nonpriority
2.1					amount	amount
					-	
Priority Creditor's Nam	ne		Last 4 digits of account number			
Number Street			When was the debt incurred?		_	
			As of the date you file, the claim	is: Check all that app	olv.	
			Contingent			
			Unliquidated			
City	State	ZIP Code	Disputed			
Who incurred the	debt? Check o	ne.	Type of PRIORITY unsecured cla	aim:		
Debtor 1 only			☐ Domestic support obligations			
Debtor 2 only Debtor 1 and D	Debtor 2 only		Taxes and certain other debts		ient	
	the debtors and a	nother	Claims for death or personal in intoxicated	ijury writte you were		
	claim is for a com	munity debt	Other. Specify			
Is the claim subje	ct to offset?		<u> </u>			
□ No □ Yes						

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Debtor 1	Michael D. Hawk	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
-	· · · · · · · · · · · · · · · · · · ·	claims against you? Submit this form to the court with your other schedules.
If a cre- type of	ditor has more than one nonpriority unsectaim it is. Do not list claims already incl	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
		Total claim
4.1 Bank of A	merica	Last 4 digits of account number \$807.00
Nonpriority Cre POB 9822 Number		When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Debtor 2 Debtor 2 Debtor 2 Debtor 3 At least Check i	•	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card
Hest Buy/0 Nonpriority Cre POB 6497 Number		\$5,710.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 3 Check i	State ZIP Code ed the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card

Debtor 1 Michael D. Hawk	Case number (if known)19-14122	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$1,147.00
Discover	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 30943	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Salt Lake City UT 84130		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Is the claim subject to offset? No Yes	Credit Card	
4.4		\$3,695.00
Fingerhut/Webbank Nonpriority Creditor's Name	Last 4 digits of account number	
6250 Ridgewood Rd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Saint Cloud MN 56303-0820	Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.5		\$15,544.00
GM Financial Nonpriority Creditor's Name	Last 4 digits of account number	
POB 181145	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	
Arlington TX 76096		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Auto Loan or Deficiency Balance	
☑ No □ Yes		

Debtor 1 Michael D. Hawk	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$2,575.00
LVNV Funding LLC	Last 4 digits of account number	
Nonpriority Creditor's Name 15 South Main Street Ste 500	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Greenville SC 29601		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Debt Buyer	
✓ No ☐ Yes		
4.7		\$2,592.00
ONEMAIN FINANCIAL Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 1010	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
Evansville IN 47706-1010 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Personal Loan	
Is the claim subject to offset?		
No No		
Yes		
4.8		\$9,660.00
PORTFOLIO RECOVERY ASSOC	Last 4 digits of account number	
Nonpriority Creditor's Name Riverside Commerce Center	When was the debt incurred?	
Number Street 120 Corporate Blvd Ste 100	As of the date you file, the claim is: Check all that apply.	
•	Contingent Unliquidated	
Norfolk , VA-235024962	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Debt Buyer	
Is the claim subject to offset?	•	
☑ No □ Yes		

Debtor 1 Michael D. Hawk	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$8,068.00
PORTFOLIO RECOVERY ASSOC	Last 4 digits of account number	
Nonpriority Creditor's Name Riverside Commerce Center	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
120 Corporate Blvd Ste 100	_ ☐ Contingent ☐ Unliquidated	
Norfolk , VA-235024962	Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Debt Buyer	
✓ No Yes 4.10 SYNCB/CARE CREDIT	Last 4 digits of account number	\$679.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 965036 Number Street	As of the date you file, the claim is: Check all that apply.	
- Officer	Contingent	
	Unliquidated	
Orlando FL 32896-5036	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans Obligations grising out of a consertion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Credit Card	
✓ No Yes		
4.11		\$294.00
The Bank of Missouri	Last 4 digits of account number	-
Nonpriority Creditor's Name 216 W 2nd Avenue	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Divers	Disputed	
Dixon MO 65459 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No Yes		

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Debtor 1	Michael D. Hawk	Case number (if known)	19-14122

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{6.} Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom r art r	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} ◀	\$50,771.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$50,771.00

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Fill in this inf	ormation to iden			
Debtor 1	Michael First Name	D. Middle Name	Hawk Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the	OF PENNSYLVANIA		
Case number (if known)	19-14122			Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Filli	in this inf	ormation to	o identify you	r case:				
Debto	or 1	Michael	D.		Hawk]	
		First Name	Middle Na	me	Last Name			
Debto (Spou	or 2 use, if filing)	First Name	Middle Na	me	Last Name			
			t for the: EASTE	RN DIS	T OF PENNS	ΥΙ VΔΝΙΔ		
	number	19-14122	Tiol tile. <u>LACTL</u>	NI DIO	1. Of TENING	TEVAINA		
(if kno		13-14122					Check if	f this is an ed filing
Offici	ial Form	106H						
Sche	edule H:	Your Co	debtors					12/1
needed page. 1. Do V 2. W	d, copy the On the top o you have No Yes within the last	Additional Pa of any Additional any codebtor at 8 years, have a, California, loo line 3.	ge, fill it out, and onal Pages, write s? (If you are five you lived in a	I numbe your na ling a joi commun	er the entries in ame and case int case, do not nity property s , New Mexico, F	the boxes on number (if known list either spous tate or territory puerto Rico, Tex	the left. Attach the Additional wn). Answer every question. se as a codebtor.) (Community property states a cas, Washington, and Wisconsin ne?	Page to this and territories
pe cr	erson show reditor on S chedule D, S	list all of you n in line 2 aga Schedule D (O	ain as a codebto fficial Form 106E , <i>or Schedule G</i>	only if), Sche	that person is dule E/F (Offic	a guarantor or	cor if your spouse is filing with cosigner. Make sure you have F), or Schedule G (Official Formation 2: The creditor to wh	e listed the m 106G). Use
	COIGITIIT 1.	Tour codebi	.oi				Check all schedules that apply:	•
0.4	Hawk, Ju	ına l					Officer all seriedules that apply.	
3.1	Name						Schedule D, line	
	Number	Street					Schedule E/F, line 4.5	<u> </u>
							Schedule G, line	
	Sinking S	Spring		PA State	18608 ZIP Code		GM Financial	
2.0	Hawk, Ju	ıne l						
3.2	Name						Schedule D, line 2.4	<u> </u>
	Number	hew Drive Street					Schedule E/F, line	
							Schedule G, line	
	Sinking S	Spring		PA State	18608 ZIP Code		Kay Pool & Spa Service	
3.3	Hawk, Ju	ine L.					☐ Schedule D, line	
	Name 103 Mattl	hew Drive					<u> </u>	
	Number	Street					Schedule E/F, line 4.7 Schedule G, line	·
	Sinking S	Spring		PA	18608		ONEMAIN FINANCIAL	
	City		;	State	ZIP Code			

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ify your case:			
D. Middle Name	Hawk Last Name	— Che	eck if this is:
Middle Name	Last Name	$- $ \Box	An amended filing
e: EASTERN DIST	T. OF PENNSYLVANIA		A supplement showing postpetition chapter 13 income as of the following date:
			MM / DD / YYYY
	Middle Name Middle Name	D. Hawk Middle Name Last Name Middle Name Last Name	D. Hawk Middle Name Last Name Che

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Fill in your employment information. If you have more than one		Debtor 1 Debtor 2 or non-filing s	spouse
	job, attach a separate page with information about	Employment status	✓ Employed✓ Employed✓ Not employed✓ Not employed	
	additional employers.	Occupation	Programmer Registered Nurse/Cl	inical Coor
	Include part-time, seasonal, or self-employed work.	Employer's name	Summit Steel Penn State Health	
	Occupation may include student or homemaker, if it applies.	Employer's address	Number Street Number Street	
			City State Zip Code City S	State Zip Code
		How long employed the	nere? 1 year 12 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

5. For Debtor 1 for Debtor 2 or non-filing spouse

2. \$7,861.34 \$5,596.20

Deb	otor 1 Michael D. Hawk		Case nur	mber (if known) 19-1	4122
		F	or Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here	4.	\$7,861.34	\$5,596.20	•
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,555.43	\$880.86	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	<u>\$503.60</u>	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$85.95	
	5e. Insurance	5e.	\$0.00	\$682.18	
	5f. Domestic support obligations	5f.	\$1,040.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	_ 5h. +	\$0.00	\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$2,595.43	\$2,152.59	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$5,265.91	\$3,443.61	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	<u>\$0.00</u>	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	\$0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	_ 8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	<u>\$0.00</u>	
	8h. Other monthly income. Specify:	8h. 🛖	\$0.00	\$0.00	
		_	\$0.00		
9.	Add all other income. Add lines $8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h$.	9.	\$0.00	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$5,265.91	+ \$3,443.61	\$8,709.52
11.	State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your housel friends or relatives.			ur roommates, and othe	er
	Do not include any amounts already included in lines 2-10 or amounts that	at are not	available to pay	expenses listed in Sche	edule J.
	Specify:			11. 4	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. income. Write that amount on the Summary of Your Assets and Liabilitie if it applies.				\$8,709.52 Combined monthly income
13.	Do you expect an increase or decrease within the year after you file	this form	?		-
	✓ No. None. Yes. Explain:				

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Ī	ill in this inforn	nation to iden	tify your case:		Cha	eck if this	, in:		
	Debtor 1	Michael	D.	Hawk			ended filing		
		First Name	Middle Name	Last Name	╽┟		lement showing	postpetition	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_		r 13 expenses a ng date:	s of the	
	United States Bankı	ruptcy Court for th	e: EASTERN DIST.	OF PENNSYLVANIA		MM / D	D / YYYY	_	
	Case number	19-14122				IVIIVI / D	D/1111		
	(if known)								
0	fficial Form 10	<u>)6J</u>							
S	chedule J: Yo	our Expense	es					12	2/15
nai	rrect information. I	f more space is r er (if known). An	needed, attach another swer every question.	ple are filing together, both a sheet to this form. On the top					
ŀ	Part 1: Descri	ibe Your Hous	sehold						
1.	Is this a joint cas	e?							
2	□ No □ Ye:	Debtor 2 live in a s	_	Expenses for Separate House	hold o	f Debtor	2.		
2.	Do you have deponded not list Debtor		No Yes. Fill out this infor for each dependent			p to	Dependent's age	Does depend	
	Debtor 2.		Tor each dependent	Child			13	☐ No	
	Do not state the denames.	ependents'		Child			9	- ☑ Yes □ No - ☑ Yes	
				Child			5	□ No □ Yes	
				Child			3	□ No - ☑ Yes	
								□ No - □ Yes	
3.	Do your expense expenses of peopyourself and you	ple other than	☑ No ☐ Yes						
F	Part 2: Estima	ate Your Ongo	oing Monthly Exper	nses					
to	•	of a date after th	e bankruptcy is filed.	ess you are using this form a If this is a supplemental Sche			•		
			•	nce if you know the value of ome (Official Form 106I.)			Your expens	ses	
4.			penses for your resider d any rent for the ground				4	\$1,728.	.00
	If not included in	line 4:							
	4a. Real estate to	axes					4a		
	4b. Property, hor	meowner's, or rent	er's insurance				4b		
	4c. Home mainte	enance, repair, and	d upkeep expenses				4c	\$250.	.00
	4d. Homeowner's	s association or co	ondominium dues				4d		

Deb	otor 1 Michael D. Hawk Case number	(if known)	19-14122
		Your e	expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:	_	
	6a. Electricity, heat, natural gas	6a.	\$375.00
	6b. Water, sewer, garbage collection (See continuation sheet(s) for details)	6b	\$104.80
	6c. Telephone, cell phone, Internet, satellite, and	6c.	\$485.00
	cable services 6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$1,500.00
8.	Childcare and children's education costs	8.	\$160.00
9.	Clothing, laundry, and dry cleaning	9.	\$150.00
10.		10.	\$60.00
11.	Medical and dental expenses	11.	\$100.00
12.	Transportation. Include gas, maintenance, bus or train	12.	\$575.00
13	fare. Do not include car payments. Entertainment, clubs, recreation, newspapers,	13.	\$120.00
	magazines, and books	_	ψ120.00
	Charitable contributions and religious donations	14	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c.	\$197.00
	15d. Other insurance. Specify:	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 durango	17a	\$571.00
	17b. Car payments for Vehicle 2		\$457.00
	17c. Other. Specify:	_	
10	17d. Other. Specify: Your payments of alimony, maintenance, and support that you did not report as	17d 18.	
10.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10	
40	Other manufacture make to assume at athems who do not live with you		
19.	Other payments you make to support others who do not live with you. Specify:	19	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	
	20b. Real estate taxes	20b	
	20c. Property, homeowner's, or renter's insurance	20c	
	20d. Maintenance, repair, and upkeep expenses	20d	
	20e. Homeowner's association or condominium dues	20e	

page 2

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Deb	tor 1	Michae	D. Hawk	Case number (if known)	19-14122
21.	Other.	Specify:	See continuation sheet	21. +_	\$657.00
22.	Calcul	ate your n	nonthly expenses.		
	22a.	Add lines	through 21.	22a	\$7,489.80
	22b.	Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	
	22c.	Add line 2	2a and 22b. The result is your monthly expenses.	22c	\$7,489.80
23.	Calcul	ate your n	nonthly net income.		
	23a.	Copy line	2 (your combined monthly income) from Schedule I.	23a	\$8,709.52
	23b.	Copy your	monthly expenses from line 22c above.	23b. – _	\$7,489.80
			our monthly expenses from your monthly income. is your monthly net income.	23c	\$1,219.72
24.	Do you	u expect a	n increase or decrease in your expenses within the year after you fil	e this form?	
			you expect to finish paying for your car loan within the year or do you expase or decrease because of a modification to the terms of your mortgage		
	☑ N				
	☐ Y	es. Explai None	n here:		

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Deb	tor 1 Michael D. Hawk	Case number (if known)	19-14122
6b.	Water, sewer, garbage collection (details): Water		\$95.00
	Garbage		\$9.80
		Total:	\$104.80
21.	Other. Specify:		
	Kids' orthodontia treatment (concluding in 2020)		\$157.00
	Non-filing spouse Debt Service	_	\$500.00
		Total:	\$657.00

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Fill in this inf	ormation to iden	tify your case:	
Debtor 1	Michael First Name	D. Middle Name	Hawk Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court for the	EASTERN DIST. O	OF PENNSYLVANIA
Case number (if known)	19-14122		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	·
	1a. Copy line 55, Total real estate, from Schedule A/B	\$255,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$46,250.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$301,250.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$277,048.79
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$50,771.00
	Your total liabilities	\$327,819.79
-	Commente Vern Income and Empares	
	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$8,709.52
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$7,489.80

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Deb	tor 1	Michael D. Hawk	ase number (if known) _ 19-14122
P	art 4	Answer These Questions for Administrative and Statistica	l Records
6.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?	
		No. You have nothing to report on this part of the form. Check this box and subr Yes	nit this form to the court with your other schedules.
7.	Wha	at kind of debt do you have?	
		Your debts are primarily consumer debts. Consumer debts are those "incurre family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistic	
		Your debts are not primarily consumer debts. You have nothing to report on this form to the court with your other schedules.	his part of the form. Check this box and submit
3.		m the Statement of Your Current Monthly Income: Copy your total current montrial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	thly income from \$12,452.18
).	Cop	by the following special categories of claims from Part 4, line 6 of <i>Schedule E</i>	/F:
			Total claim
	Fro	m Part 4 on Schedule E/F, copy the following:	
	9a.	Domestic support obligations. (Copy line 6a.)	\$0.00_
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9d.	Student loans. (Copy line 6f.)	\$0.00
	9e.	Obligations arising out of a separation agreement or divorce that you did not repopriority claims. (Copy line 6g.)	ort as \$0.00
	9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
	9g.	Total. Add lines 9a through 9f.	\$0.00

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Fill in this inf	ormation to	identify your case	:
Debtor 1	Michael	D.	Hawk
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	or the: EASTERN DIS	T. OF PENNSYLVANIA
Case number	19-14122		
(if known)			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information. $\frac{1}{2} \int_{\mathbb{R}^{n}} \frac{1}{2} \int_{\mathbb{R}^{n}} \frac{1}$

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below					
Did you pay or agree to pay someone who is l	NOT an attorney to help you fill out ban	kruptcy forms?			
☑ No					
Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.					
X /s/ Michael D. Hawk Michael D. Hawk, Debtor 1	XSignature of Debtor 2				
Date 06/20/2019 MM / DD / YYYY	Date MM / DD / YYYY				

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B2030 (Form 2030) (12/15)			
UNITED STATES BANK EASTERN DISTRICT OF READING DI	PENNSYLVANIA		
In re Michael D. Hawk	Case No.	19-14122	
	Chapter	13	
DISCLOSURE OF COMPENSATION	OF ATTORNEY FOR	RDEBTOR	
 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert that compensation paid to me within one year before the filing of t services rendered or to be rendered on behalf of the debtor(s) in is as follows: 	the petition in bankruptcy, or	agreed to be paid to me, for	
For legal services, I have agreed to accept	<u>\$</u>	4,000.00	
Prior to the filing of this statement I have received		1,000.00	
Balance Due	\$	3,000.00	
2. The source of the compensation paid to me was:			
☑ Debtor ☐ Other (specify)			
3. The source of compensation to be paid to me is:			
☑ Debtor ☐ Other (specify)			
4. I have not agreed to share the above-disclosed compensation associates of my law firm.	on with any other person unle	ss they are members and	
I have agreed to share the above-disclosed compensation w associates of my law firm. A copy of the agreement, togethe compensation, is attached.			
5. In return for the above-disclosed fee, I have agreed to render legal	al service for all aspects of the	e bankruptcy case, including:	
 a. Analysis of the debtor's financial situation, and rendering advict bankruptcy; 	ce to the debtor in determinin	g whether to file a petition in	
b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;			

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;